## DO/EO BIBLIOGRAPHIC DATA ENTRY

RECEIPT DATE: 08 / 981087 SERIAL NUMBER: SERIAL NUMBER: 08 / 981087

IA NUMBER: PCT/ GB96 / 01409

FAMILY NAME: ELMORE

GIVEN NAME: MICHAEL JAMES

PRIORITY CLAIMED (Y/N): Y

NO BASIC FEE (Y/N): N

ATTORNEY DOCKET NUMBER: 1581.0200000

COUNTRY: GBX

TELEPHONE 20273426

CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER:

TELEPHONE

NAME: STERNE KESSLER GOLDSTEIN & FOX 1100 NEW YORK AVENUE NW

1100 NEW YORK STREET: SUITE 600

CITY: WASHINGTON

ZIP: 200053934 STATE/COUNTRY: DC

APPLICATION TITLES:

TYPE F BOTULINUM TOXIN AND USE THEREOF

TAB TO LAST POSITION, PUSH SEND